									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 09-447378															
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	. EI	YTITY	OR	OTHER			
TOTAL CLAIMS								RAT	E	FEE] .	RATE	FEE		
FOR			NUMBER FILED .		NUMB	NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9	=		OR	X\$18=			
INDEPENDENT CLAIMS			minus 3 =		•			X43	•		OR	X86=			
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT						+145=			+290=			
• 17	the difference	in column 1 is l	less than 76	ro enter	*0* in c	column 2	,			<u> </u>	OR				
Dr. D. John Total												THAN			
CLAIMS AS AMENDED - PART II CE f								SMA	W.	ENTITY	ÒЯ	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	Ċ	
DME	Total	. 15	Minus	-2	0	= .		X\$ 9	*	,	OR	X\$18=	770		
N E	Independent	. 7	Minus	***	3	e 4		X43	2		OR	X86≃	344		
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145				+290=			
	, pa.bl								E IAL		OR	TOTAL	1.110	a	
-	1-23-09 (Column 3) (Column 3)							ADDIT. F			OR	ADDIT. FEE	1911 9		
AMENDMENT B		CLAMS		(Colui	EST	(Column 3)	ו			ADDI-			ADDI-		
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE			
DME	Total	- 14	Minus	-7	0.	•]	XS 9	•		OR	X\$18-	-		
ME	Independent	- 6	Minus	P	3	· 3		X43:			OR	X86⇒			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+290=			
					٠.		1	+145			OR	TOTAL		ł	
									Œ		IOH	ADDIT. FEE	L	1	
•		(Column 1)		(Colu	****	(Column 3)	,	·		400	1		AD'A	ł	
AMENDMENT C	•	REMAINING AFTER AMENDMENT	•	PREVIO PAID	DUSLÝ	PRESENT EXTRA		RATI	Œ .	ADDI- TIONAL FEE	TONAL	RATE	TIONAL		
2	Total	•	Minus	**			1	X\$ 9	-		OR	X\$18=			
E E	Independ nt	•	Minus	***		-	.	X43:			O'R	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												+290=	1	1	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145			OR	TOTAL	 	+	
* If the entry in column 1 is less than the entry in column 2, write "o" in column 3. "If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE ADDIT, FEE													1		
	The Trighest Nurr	ber Previously Pai	d For (Total or	Independ	ent) is the	highest numb	er to	und in the	e p	propriate bo	a in c	olumn 1.			
FORM	PTO-675 (Rev. 16	DOSS			<u> </u>		Pa	lentand T	rade	metti Office, U	3. DE	PARTMENT O	F COMMERC	Ē	